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MAY 14 2010

ARIZONA DEPARTMENT OF WATER RESOURCES

Water Management Division
3550 North Central Ave, 2nd Floor
Phoenix, Arizona 85012-2105

Phone (602) 771-8585 Fax (602) 771-8689

WATER MGMT

APPLICATION FOR A RECOVERY
WELL PERMIT (§ 45-834.01)

APPLICATION FEE OF \$ 50.00 PER WELL FOR
THE 1ST 10 WELLS PLUS \$ 10.00 PER WELL
THEREAFTER IS DUE UPON FILING.

PERMIT FEE (SAME AS APPLICATION FEES), PLUS
NOTICE AND PUBLICATION FEES TO BE DETERMINED,
ARE DUE PRIOR TO ISSUANCE OF PERMIT.

PLEASE SUBMIT ONE ORIGINAL AND TWO COPIES OF THE
COMPLETED APPLICATION AND ALL SUPPORTING MATERIALS.

FOR OFFICE USE ONLY	
Application No.:	<u>74-553424.0011</u>
Date Received:	<u>5-14-10</u>

- Name of Applicant: City of Avondale

<u>399 E. Lower Buckeye Road, Suite 100</u>	<u>Avondale</u>	<u>AZ</u>	<u>85323</u>
Mailing Address	City	State	Zip

Contact Person Robin Stinnett Telephone 623-333-4449 Fax 623-333-0440
- Name of Active Management Area or Irrigation Non-Expansion Area if applicable, and name of groundwater basin and subbasin where the facility will be located Phoenix AMA, West Salt River Valley Subbasin
- Name of the owner(s) of the land where wellsites are located City of Avondale
Mailing Address 11465 W. Civic Center Drive, Avondale, AZ 85323
(If more than one owner, attach a list showing corresponding land owner and well registration number(s)).
- Legal description of the land where water will be used City of Avondale service area
(quarter/quarter/quarter/section, township and range)
- The recovered water will be used for Municipal

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6. The recovery wells will be used to recover water stored pursuant to Water Storage Permit No. 70-441135 or long-term storage account number. WATER MGMT

7. Complete the following for each constructed well. If data supplied differs from the ADWR well registry, please submit a change of well information form. Attach supplement if needed.

Name of Well Owner	Well Registration Number	Location: 1/4, 1/4, 1/4, Section, Township, Range	Design Pump Capacity (GPM)	Hole Depth (Feet)	Casing Diameter (inches)	Proposed Annual Volume (Acre-feet)	Date Well Constructed
COA	55-217002	NE, NE, NE, 12, 1N1W	2,500	630	16	4,032	4/29/08
COA	55-217001	NW, NE, NE, 11, 1N1W	1,200	845	16	1,935	3/13/08

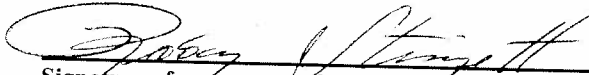
8. Complete the following for each proposed well to be constructed.

Well Registration Number	Location: 1/4, 1/4, 1/4, Section, Township, Range	Design Pump Capacity (GPM)	Hole Depth (Feet)	Casing Diameter (inches)	Proposed Annual Volume (Acre-feet)	Estimated Date of New Well Construction	Estimated Time Required To Complete Well

I (We), Robin Stinnett, the applicant(s) named in this application, do hereby certify under the penalty of perjury, that the information contained and statements made herein are to the best of my (our) knowledge and belief true, correct and complete.

623-333-4449

Telephone


Signature of owner or authorized agent

Water Resource Planning Manager

Title

399 E. Lower Buckeye Road, Suite 100

Avondale

AZ

85323

Mailing Address

City

State

Zip

STATE OF ARIZONA

County of Maricopa)

)
) ss.

Subscribed and sworn to before me this 28th day of April, 20 10.


Notary Public

April 20, 2012
My commission expires:

